



TFW 3627

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/867,200	
	Filing Date	05/29/2001	
	First Named Inventor	Robert H. Scheer	
	Art Unit	3627	
	Examiner Name	Cuff, Michael A.	
Total Number of Pages in This Submission	6	Attorney Docket Number	31083.05US3

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (Substitute) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - return postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Customer No. 34018 Greenberg Traurig LLP		
Signature			
Printed name	Gary R. Jarosik		
Date	October 6, 2006	Reg. No.	35,906

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Ranni Matar	Date	October 6, 2006

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Scheer)	Examiner:	Cuff, Michael A.
)		
Serial No.:	09/867,200)	Art Unit:	3627
)		
Filed:	May 29, 2001)	Attny Doc.:	31083.05US3
)		
Title:	Method For Managing)		
	Inventory Within An)		
	Integrated Supply Chain)		

RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated September 25, 2006 please consider the remarks which begin on page 2 of this paper.

While it is not believed that any fees are due, the Commissioner is authorized to charge any fee deficiency to deposit account 50-2428 in the name of Greenberg Traurig.

Certificate of Mailing: I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class mail, postage prepaid, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 6 day of October, 2006.

By: Ranni Matar
Ranni Matar